

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

09/549848

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		FEE		RATE	FEE
BAS	SIC FEE				\$ y = .	RATE	345.00	OR		690.00
TOT	AL CLAIMS	3	33 minus 20= * 3			X\$ 9=		OR	X\$18=	234
INDE	INDEPENDENT CLAIMS 5 minus 3 = * 2					X39=		OR	X78=	156
MULTIPLE DEPENDENT CLAIM PRESENT						+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	1080
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SMALL E	NTITY	OR	OTHER SMALL	THAN
AMENDMENT A	√- z.	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	. 33	Minus	33	=	X\$ 9=		OR	X\$18=	1
AME	Independent	* 5 NTATION OF MU	Minus	*** 5	=	X39=		OR	X78=	
	FINOT PRESE	TATION OF MIC	JUITE DEPE	INDENT CLAIM		+130=		OR	+260=	
						TOTAL		OR	TOTAL	
		(Column 1)		(Column 2)	(Column 3)	ADDIT. FEE		•	ADDIT. FEE	-
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 35	Minus	33	=2	X\$ 9=		OR	X\$18=	36-00
AME	Independent	• 5	Minus	*** 5	=	X39=		OR	X78=	
$\vdash$	FIRST PRESE	NTATION OF MI	ULTIPLE DEPE	ENDENT CLAIM		+130=		OR	+260=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	al.
		(Column 1)		(Column 2)	(Column 3)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	V
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW [	Total	2	Minus	·· 135	= /	X\$ 9= ·		OR	X\$18=	<b>1</b>
ME [	Independent	٠ ٧/	Minus	··· &	= /	X39=			X78=	<del>                                     </del>
	FIRST PRESE	NTATION OF MI	ULTIPLE DEPE	NDENT CLAIM		7,03-		OR		<del>  /                                   </del>
. 16	the entry in colum	nn 1 is lace than ti	ne entry in colum	n 2, write "0" in co	tumn 3	+130=		OR	+260=	/
. (1		nn i is less than t nber Previously Pa				TOTAL		OR	TOTAL	1/

## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

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APPLICATION NUMBER:	09	549848

Total Fee Calculation							
	Fee Code	Total . # Claims	Number Extra	х	Fe	· -	
,	S=Ag.				Sm. Entity	Fee =	<u>Total</u>
Bwic Filing Fee	201/101				•	690.	690
Total Claims >20	203/103	33 -20 -	13	X	<del></del>	13	
ibdependent Claims >3	202/102	<u>5</u> .; e	2	Х			234
Multi-Dep Claim Present	<u> </u>						156
Sutherpe	205/105	•					122
English Translation	139					E	130
TOTAL FEE CALCULA	TION						1210
Fees due upon filing t	e application:					••	
Total Filing Fees Due	= S	1,210.0	<u>D</u>	-			
Less Filing Fees Submi	ned - \$	0		-	;		
BALANCE DUE	= 2	1210.	$\mathcal{Q}$				
Office Seld	Jal	•					

FORM OPE-RAM-01 (Rev. 12/97)